



## LANDLORD CONTACT INFORMATION VERIFICATION/MODIFICATION FORM

Starbucks Store # \_\_\_\_\_

Starbucks Corporation requires the following information to establish or update Landlord's address for rental payments and contact information. To avoid a delay of rental payments, please forward the signed form to the attention of FLA-BACKUP REQUEST at the Starbucks address at the bottom of this form or email the completed form to [financialleaseadmi@starbucks.com](mailto:financialleaseadmi@starbucks.com).

(PLEASE PRINT OR TYPE)

<b>Landlord Notice Address</b>			
Landlord Name:			
Attention:			
Address:			
City/State/Zip:			
<b>Landlord Overnight Notice Address</b> (if above Notice Address is a PO Box)			
Attention:			
Address:			
City/State/Zip:			
<b>Remittance Address</b> (if different from above Notice Address)			
Payee:			
Attention:			
Address:			
City/State/Zip:			
<b>Sales Reporting Contact</b> (if applicable to your Lease)			
Contact Person/Title:			
Address:			
City/State/Zip:			
Phone:		Email:	
<b>Property Management Information</b>			
Company Name:			
Address:			
City/State/Zip:			
Contact Person/Title:		Facility Contact Name:	
Phone:		Facility Contact Phone:	
Fax:			
Email:		Emergency Phone:	

Starbucks Corporation is unable to issue rental payments until it receives complete and accurate information, including a W-9 form & supplemental documentation for ownership/entity change requests. Upon receipt, please allow Starbucks 7 to 10 business days to process. Thank you in advance for your cooperation.

I authorize the above changes effective \_\_\_\_\_  
(date)

Landlord Signature: \_\_\_\_\_  
Name (printed): \_\_\_\_\_  
Title: \_\_\_\_\_